



13281 U.S. PTO

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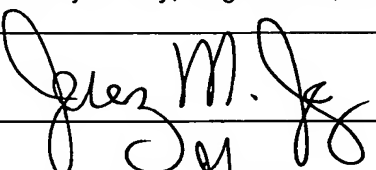
UTILITY PATENT APPLICATION TRANSMITTAL		Attorney Docket No.	402869/NIH
		Client Reference No.	E319-2003/0-US-1
		First Inventor	URQUIDI-MACDONALD et al.
		Title	NEURAL NETWORK PATTERN RECOGNITION FOR PREDICTING PHARMACODYNAMICS USING PATIENT CHARACTERISTICS
		Express Mail Label No.	
<i>(Only for new nonprovisional applications under 37 CFR 1.53(b))</i>			
APPLICATION ELEMENTS		Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	
		ACCOMPANYING APPLICATION PARTS	
1. <input checked="" type="checkbox"/> Utility Patent Application Transmittal Form		10. <input type="checkbox"/> Applicant requests early publication. (include publication fee under 37 CFR 1.18(d))	
2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.		11. <input checked="" type="checkbox"/> Assignment Papers (cover sheet and document(s))	
3. <input checked="" type="checkbox"/> Specification (including claims and abstract) [Total Pages 40]		12. <input type="checkbox"/> 37 CFR 3.73(b) Statement (when there is an Assignee)	
4. <input checked="" type="checkbox"/> Drawings [Total Sheets 15]		13. <input type="checkbox"/> Power of Attorney	
5. <input checked="" type="checkbox"/> Combined Declaration and Power of Attorney [Total Pages 4]		14. <input type="checkbox"/> English Translation Document (if applicable)	
a. <input checked="" type="checkbox"/> Newly executed		15. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS) <input checked="" type="checkbox"/> Form PTO-1449 <input checked="" type="checkbox"/> Copies of References (except for U.S. patents and applications)	
b. <input type="checkbox"/> Copy from prior application [Note Box 6 below]		16. <input type="checkbox"/> Preliminary Amendment	
i. <input type="checkbox"/> <u>Deletion of Inventor(s)</u> Signed statement attached deleting inventor(s) named in the prior application		17. <input checked="" type="checkbox"/> Return Receipt Postcard (Should be specifically itemized)	
6. <input type="checkbox"/> Incorporation by Reference: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b is considered as part of the disclosure of the accompanying application and is hereby incorporated by reference.		18. <input type="checkbox"/> Claim of Priority & Certified Copy of Priority Document(s)	
7. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76		19. <input type="checkbox"/> Request & Certification Under 35 USC 122(b)(2)(B)(i) (Form PTO/SB/35 or its equivalent attached)	
8. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)		20. <input type="checkbox"/> Other:	
9. Nucleotide and/or Amino Acid Sequence Submission			
a. <input type="checkbox"/> Computer Readable Form (CRF)			
b. Specification Sequence Listing on:			
i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or			
ii. <input type="checkbox"/> Paper Copy			
c. <input type="checkbox"/> Statement verifying identity of above copies			
21. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part of prior application no. . Prior application information: Examiner ; Group Art Unit:			



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## UTILITY PATENT APPLICATION TRANSMITTAL

Attorney Docket No. 402869/NIH  
 Client Reference No. E319-2003/0-  
 US-1

APPLICATION FEES				
BASIC FEE				\$770.00
CLAIMS	NUMBER FILED	NUMBER EXTRA	RATE	
Total Claims	46 -20=	26	x \$18.00	\$468.00
Independent Claims	4 - 3=	1	x \$86.00	\$86.00
<input type="checkbox"/> Multiple Dependent Claim if applicable			+ \$290.00	\$
Total of above calculations =				\$1,324.00
Reduction by 50% for filing by small entity =				\$( )
<input checked="" type="checkbox"/> Assignment fee if applicable			+ \$40.00	\$40.00
<input type="checkbox"/> Early publication fee if applicable			+ \$300.00	\$
TOTAL =				\$1364.00
<p>22. <input checked="" type="checkbox"/> Please charge my Deposit Account No. 12-1216 in the amount of \$1364.00.</p> <p>23. <input type="checkbox"/> A check in the amount of \$ is enclosed.</p> <p>24. The Commissioner is hereby authorized to credit overpayments or charge any additional fees of the following types to Deposit Account No. 12-1216:</p> <p>a. <input checked="" type="checkbox"/> Fees required under 37 CFR 1.16.</p> <p>b. <input type="checkbox"/> Fees required under 37 CFR 1.17.</p> <p>25. <input type="checkbox"/> The Commissioner is hereby generally authorized under 37 CFR 1.136(a)(3) to treat any future reply in this or any related application filed pursuant to 37 CFR 1.53 requiring an extension of time as incorporating a request therefor, and the Commissioner is hereby specifically authorized to charge Deposit Account No. 12-1216 for any fee that may be due in connection with such a request for an extension of time.</p>				
26. CORRESPONDENCE ADDRESS				
<input checked="" type="checkbox"/> Customer Number: 23548  23548		<input type="checkbox"/> Jeremy M. Jay, Reg. No. 33,587 Leydig, Voit & Mayer 700 Thirteenth Street, N.W., Suite 300 Washington, D.C. 20005-3960 (202) 737-6770 (telephone) (202) 737-6776 (facsimile)		
Name	Jeremy M. Jay, Reg. No. 33,587			
Signature				
Date	29 Mar. 2004			